24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Madison Project Inc.	
	C C00298000
Check if 24-hour report X 48-hour report New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Madison Project Inc.	05 11 2015
Mailing Address PO Box 15179	Amount
City State Zip Code	1.00
Washington DC 20003	Transaction ID : SE.370752 Date of Disbursement or Obligation
Purpose of Expenditure Online Processing Fees Category/ Type 001	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District: 00
Ronald DeSantis Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For:
Full Name of Payee Madison Project Inc.	Date of Public Distribution/Dissemination
Mailing Address PO Box 15179	05 26 2015
1 O BOX 10110	Amount
City State Zip Code	3.75
Washington DC 20003	Transaction ID : SE.370759 Date of Disbursement or Obligation
Purpose of Expenditure Online Processing Fees Category/ Type 001	05 26 2015
Name of Federal Candidate Support Office	e Sought: House District: 00
Ronald DeSantis Oppose	President State: FL
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For:
(a) SUBTOTAL of Itemized Independent Expenditures	4.75
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	-/\(\) = \(\).	101120		PAGE 2 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Madison Project Inc.				C C00298000
Check if 24-hour report X 48-hour report	X New repo	ort Amends rep	port filed	on M = M / D = D / Y = Y = Y
Full Name of Payee Madison Project Inc.				Date of Public Distribution/Dissemination
Mailing Address PO Box 15179				06 22 2015 Amount
	. ,			105
1 ,	tate DC	Zip Code 20003		1.25 Transaction ID : SE.370764
		1		Date of Disbursement or Obligation
Purpose of Expenditure Online Processing Fees		Category/ Type 00	1	06 / 22 / Y Y Y Y Y Y Y
Name of Federal Candidate		X Support	Office	Sought: House District:00
Ronald DeSantis		Oppose		President State: FL
Calendar Year-To-Date Per Election for Office Sought		6.00	Disbu 2016	rsement For:
Full Name of Payee				Date of Public Distribution/Dissemination
Madison Project Inc.				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 15179				06 30 2015
				Amount
City	tate	Zip Code		1.75
Washington	DC	20003		Transaction ID : SE.370768 Date of Disbursement or Obligation
Purpose of Expenditure Online Processing Fees		Category/ Type 001	1	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		X Support	Office	Sought: House District: 00
Ronald DeSantis		Oppose		President State: FL Senate
Calendar Year-To-Date Per Election for Office Sought		7.75	Disbu 2016	rsement For:
				(-F))
(a) SUBTOTAL of Itemized Independent Expenditures			···· >	3.00
(b) SUBTOTAL of Unitemized Independent Expenditures	s		···· •	1 1 7 1 1 7 1 1 7 1
(c) TOTAL Independent Expenditures			···· •	
Under penalty of perjury I certify that the independent e with, or at the request or suggestion of, any candidate o party committee) any political party committee or its age	or authorized			
Mr. Paul A Kilgore	[Electroni	ically Filed] Da	ite 0	7 27 2015
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	ADEITI EXI END	TIONES		PAGE 3 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER ▼
Madison Project Inc.			C	C00298000
Check if 24-hour report X 48-hour rep	ort New rep	ort Amends repo	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee Madison Project Inc.			M = M	ic Distribution/Dissemination
Mailing Address PO Box 15179			07 Amount	02 2015
City	State	Zip Code		0.25
Washington	DC	20003		ID: SE.370774 ursement or Obligation
Purpose of Expenditure Online Processing Fees		Category/ Type 001	M 07	02 2015
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ronald DeSantis		Oppose		Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	,	8.00	Disbursement For: 2016 Other (s	Primary General pecify) ▶
Full Name of Payee Madison Project Inc.			Date of Publ	ic Distribution/Dissemination
Mailing Address PO Box 15179			Amount	10 2013
City	State	Zip Code		1.00
Washington	DC	20003		D: SE.370780 ursement or Obligation
Purpose of Expenditure Online Processing Fees		Category/ Type 001	07	18 2015
Name of Federal Candidate		X Support	Office Sought:	House District: 00
Ronald DeSantis		Oppose		Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		9.00	Disbursement For: 2016 Other (s	Primary General pecify) ▶
(a) SUBTOTAL of Itemized Independent Exp	penditures			1.25
(b) SUBTOTAL of Unitemized Independent I	Expenditures		. •	
			-	4
(c) TOTAL Independent Expenditures			>	4
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Mr. Paul A Kilgore	[Electron	ically Filed] Date	07 / D D	2015
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Madison Project Inc.	C C00298000
Check if 24-hour report 48-hour report New report Amends report fi	iled on Man / Dab / Yayayay
Full Name of Payee Silver Bullet Group Inc	Date of Public Distribution/Dissemination
Mailing Address 4730 South Fort Apache Road Ste 30	07 25 2015
	Amount
City State Zip Code Las Vegas NV 89147	73500.00 Transaction ID : SE.370683
Purpose of Expenditure Walk Hours/Phones (Non-Contribution Account) Category/ Type 001	Date of Disbursement or Obligation 07 23 2015
Name of Fodous Condidate	ffice Sought: House District: 00
Ronald DeSantis Oppose	President Senate State: FL
	isbursement For: X Primary General 116 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate Support Oppose	ffice Sought: House District:
	isbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	73500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	73509.00
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eigenty committee) any political party committee or its agent.	
Mr. Paul A Kilgore [Electronically Filed] Date	07 27 2015